BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

69741571

			_				•					
		CLAIMS A	S FILED - PART I					SMALL ENTITY			OTHER	THAN
T	TAL CLAIMC		(Columr	1 ±	(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS				13 .				RATE	FEE		RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGEA	ABLE CLAIMS	1 <i>3</i> mii	nus 20=	* O			X\$ 9=		OR	X\$18=	1
INDEPENDENT CLAIMS			3 m	inus 3 =	* O		,	X40=		OR	X80=	/
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT						 			/
* if	the difference	in column 1 is	less than zero, enter "0" in column 2				l	+135=		OR	+270=	/
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	7/0
- 6	3/12/04 6	LAIMS AS A (Column 1)				(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS		HIGH			r	RATE	ADDI-			ADDI
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA			TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.12	Minus	F		=		X\$ 9=		OR	X\$18=	
	Independent	· 3	Minus	<u>~:3</u>		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			070	
								+135=		OR	+270=	
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	Λ											
AMENDMENTB		CLAIMS REMAINING AFTER AMENDMENT	3	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	l	X\$ 9=	- C. C.	OR	X\$18=	_ FEC
	Independent	*	Minus	***		=	┢	X40=				
<	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		┝	A40=		OR	X80=	
								+135=		OR	+270=	
			A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE					
		(Column 1)		(Colun		(Column 3)						
AMENDMENT		CLAIMS		HIGH			Г		ADDI-			ADDI
		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ı	X\$ 9=	1	OR	X\$18=	1 4-6-
	Independent	*	Minus	***		=	H	X40=			X80=	
ď	FIRST PRESENTATION OF MULTIPLE DEPEND				CLAIM		Ļ	740=		OR	X8U=	
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE												
	The "Highest Num	nber Previously Pai	d For" (Total o	r Independe	ent) is the	highest number	four	nd in the app	ropriate box	in col	umn 1.	